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APR 14 2004

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27383 7590 02/09/2004

CLIFFORD CHANCE US LLP  
200 PARK AVENUE  
NEW YORK, NY 10166

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Pamela D. Howe	(Depositor's name)
<i>Pamela D. Howe</i>	(Signature)
<i>4/12/04</i>	(D)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/016,165	11/01/2001	Joerg Schlieffel	7157-481	7803

TITLE OF INVENTION: HAND-HELD DATA ACQUISITION DEVICE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	05/10/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
FRECH, KARL D	2876	235-472010

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Symbol Technologies, Inc.

Holtsville, NY

Please check the appropriate assignee category or categories (will not be printed on the patent):  individual  corporation or other private group entity  government

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Issue Fee  
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(Authorized Signature) Ira J. Schaefer (Date) 4/12/04  
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01 FC:1501	1330.00 DA
02 FC:1504	300.00 DA
03 FC:8001	30.00 DA